



Armed Forces College of Medicine AFCM



Basal ganglia

Dr. Sarah Mahmoud

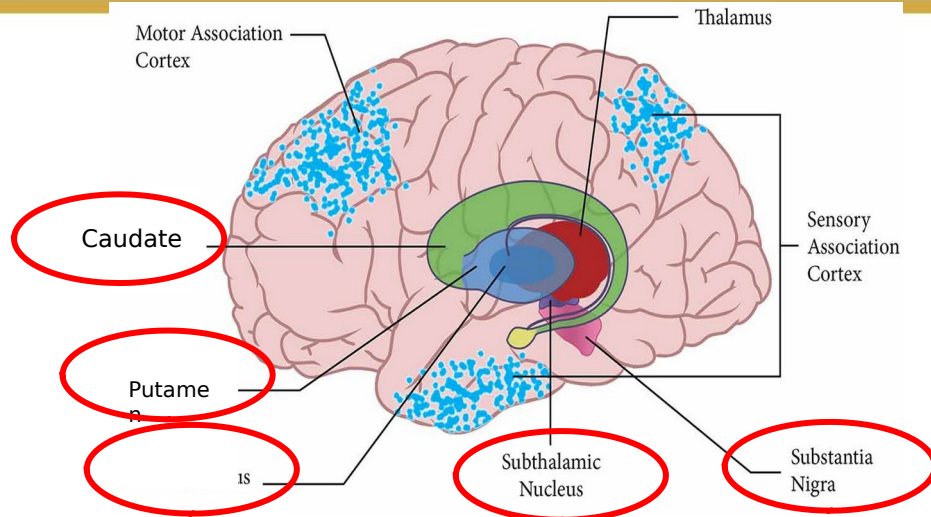
INTENDED LEARNING OBJECTIVES (ILO)



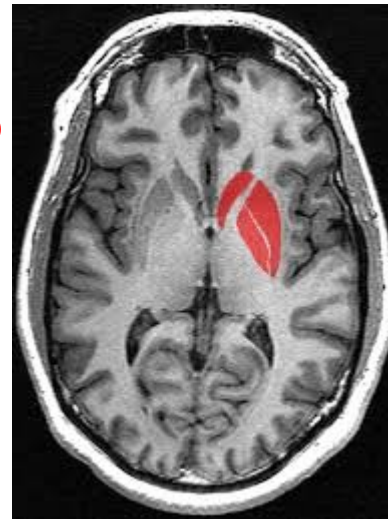
By the end of this lecture the student will be able to:

1. List the BG nuclei and the functionally associated centers.
2. List the functions of the basal ganglia.
3. Illustrate the role of dopamine in direct and indirect circuits.
4. Describe mechanism of Parkinson's diseases.
5. Explain the cause of tremors and rigidity in Parkinson's disease.

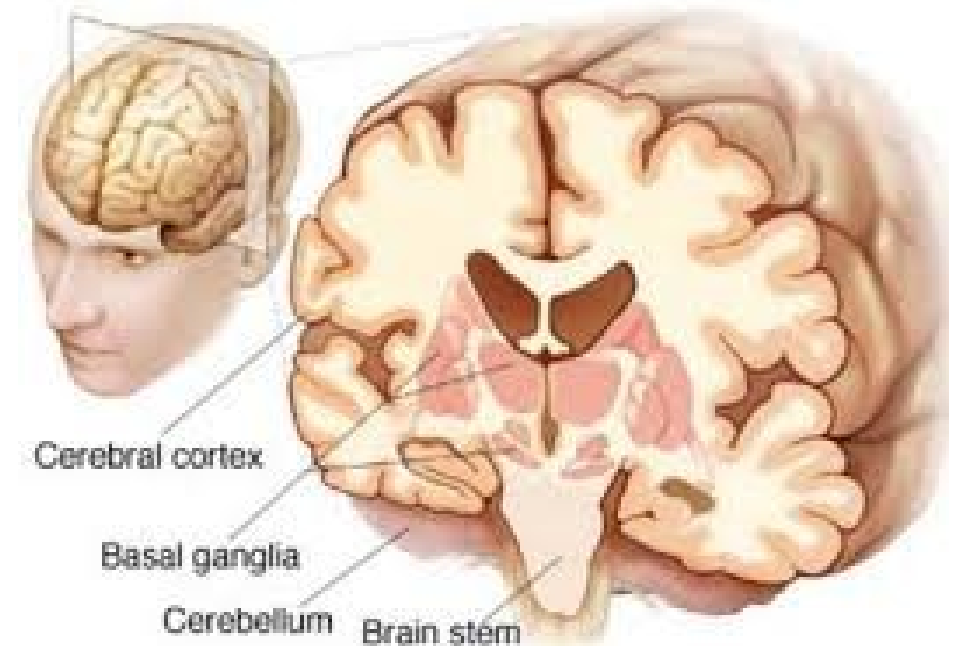
Anatomy of the Basal Ganglia



https://upload.wikimedia.org/wikipedia/commons/8/8c/Cortical_surface_with_an_overlay_of_the_basal_ganglia_and_thalamus.jpg



https://upload.wikimedia.org/wikipedia/commons/thumb/7/7d/Striatum_Structural_MRI.png/330px-Striatum_Structural_MRI.png



https://encrypted-tbn0.gstatic.com/images?q=tbn%3AANd9GcRIOxVbS7z1ij383OUiNx9ivxwn1O6_tjnJGqiF48RnLMwIHs

Anatomy of the Basal Ganglia



- **Caudate nucleus.**

- **Putamen nucleus.**

**Corpus
Striatu**

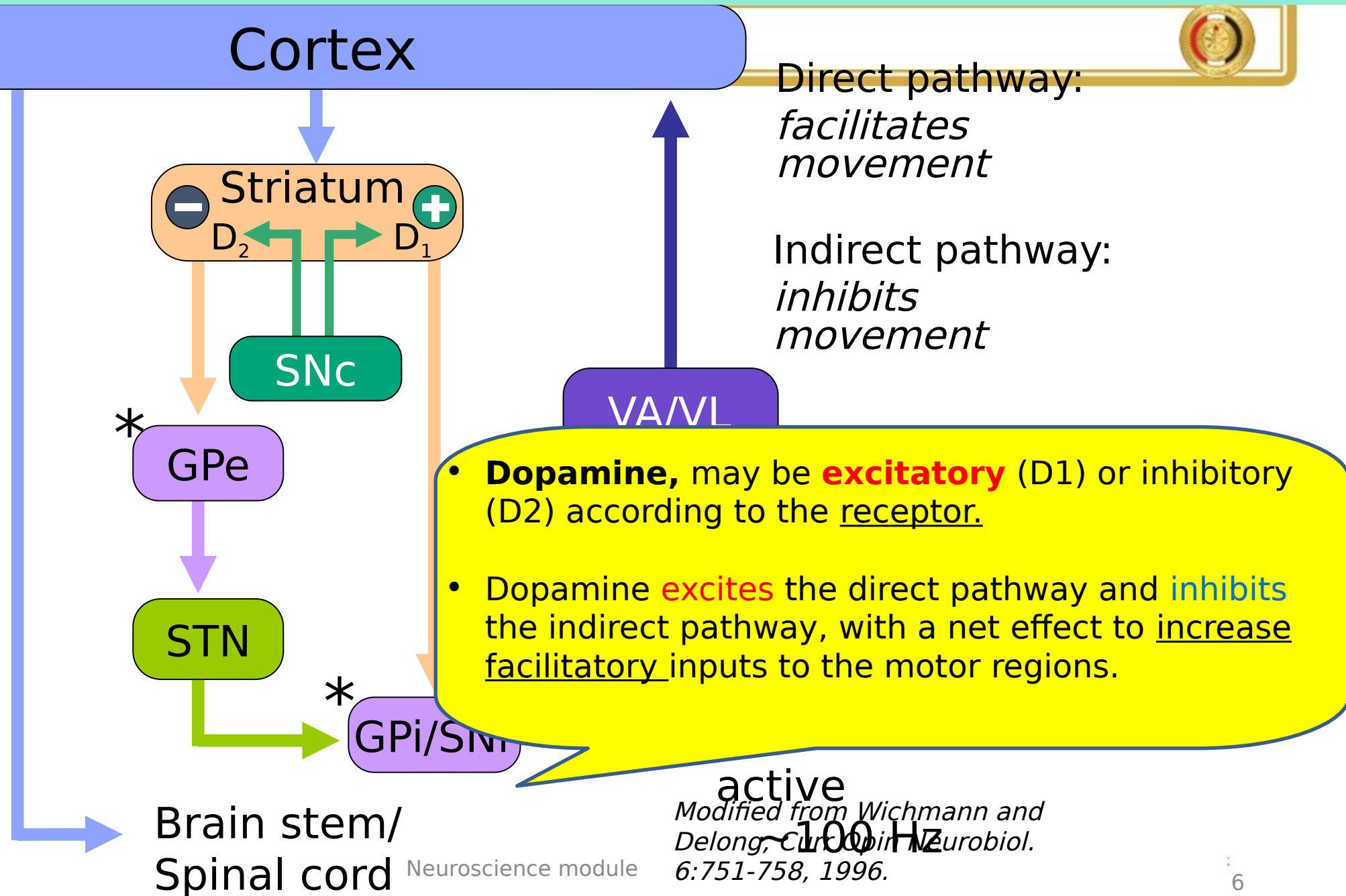
- **Globus pallidus:**
(internal and external parts)

**m Lenticular
nucleus**

- **Subthalamic nucleus.**

- **Substantia nigra.**
(pars compacta & pars reticulata).

Role of dopamine in direct & indirect circuits



Functions of the Basal Ganglia



1- Cognitive control of sequences of motor patterns

Planning & programming

to “**select**” and “**plan**” the motor sequence to achieve a complex goal

Neurons of the BG discharge **before** movements begin.

Thought → voluntary action

2- Timing and scaling of movements

Determines

how large (= **spatial dimensions**) and **how fast** the movement will be



<https://www.euroformhealthcare.biz/medical-physiology/function-of-the-basal-ganglia-to-change-the-timing-and-to-scale-the-int>

Functions of the Basal Ganglia (Motor)



Execution of proper movement

putamen circuit

3- Execution of **subconscious learned** patterns of movement

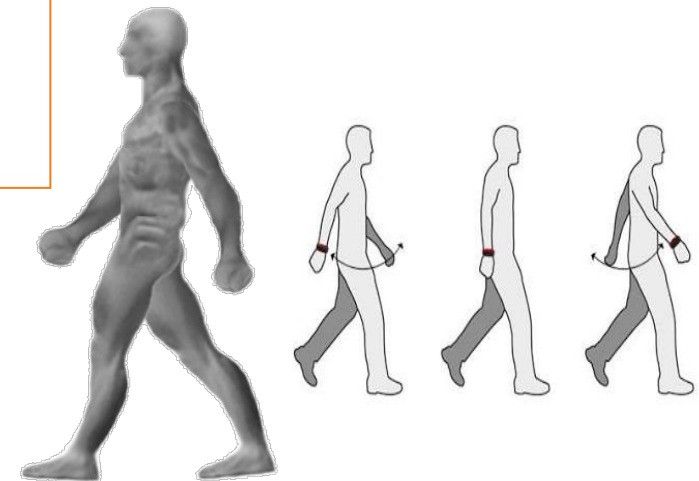
e.g. cutting with scissors
some aspects of vocalization

4- Initiation and regulation of the **gross associative movements** of the body

e.g. swinging of arms and facial expression



<https://www.livescience.com/44494-human-facial-expressions-compound-emotions.html>



https://en.wikipedia.org/wiki/Arm_swing_in_human_locomotion#/media/File:Walk-Cycle

Functions of the Basal Ganglia (Motor)

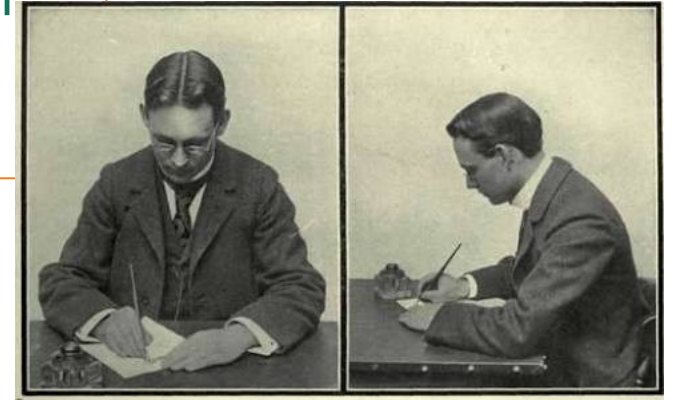


The globus pallidus

5- Responsible for the **posture** taken by the body to perform a particular voluntary movement

It locks the different parts of the body into a **specific position** so as to facilitate the fine movements of the hand.

6- Inhibitory to muscle tone (Damage → Rigidity)



https://lh3.googleusercontent.com/izdPyN7Ddey4Soz2q0G4QGm6g7sM6H4NlvsmnWEIaPir_Hyjt1M8WJrNC_jPXmGuMxpvXw=s136

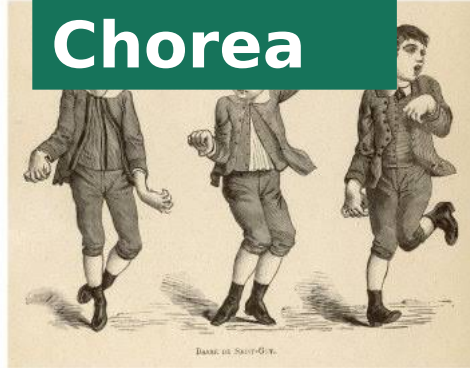
Diseases of the basal ganglia in human

➤ Normal function of the BG is brought about by a **balance** between the various excitatory and inhibitory influences of the various transmitters.

➤ Diseases of the BG lead to 2 general types of disorders; **hyperkinetic** (1,2&3) and **hypokinetic** (akinesia & bradykinesia)

➤ BG dysfunction does **NOT** cause paralysis, sensory loss or ataxia but leads to **abnormal involuntary movement** & change in ms. Tone (hypertonia or hypotonia).

1- Chorea



<http://absorbmedicine.blogspot.com/2013/11/causes-of-chorea-medical-mnemonics.html>

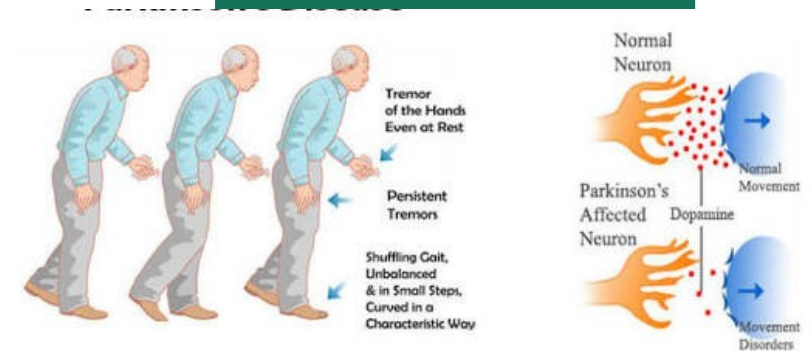
2- Athetosis



3-



4-



<https://studfiles.net/preview/396004/page:8/> <https://www.dailyhealthguard.com/treating-parkinsons-disease-new->

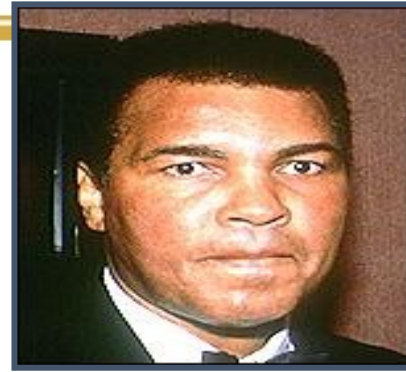
Parkinson's disease = paralysis agitans

Cause

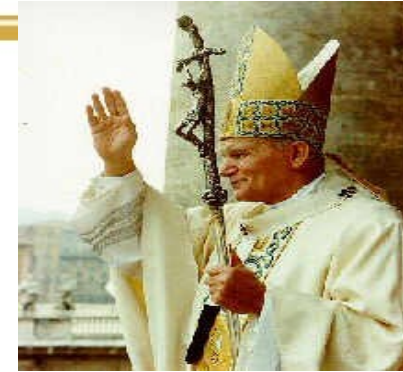
Loss of dopaminergic influence



Michael J. Fox



Muhammad Ali



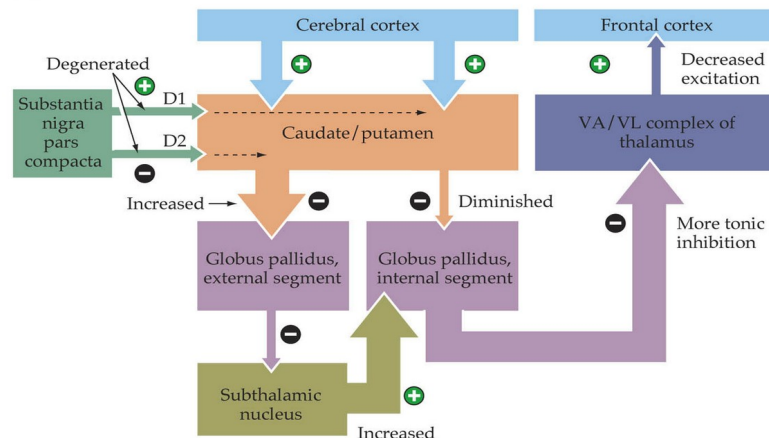
Pope John Paul II

Treatment:

L-dopa

Mechanisms

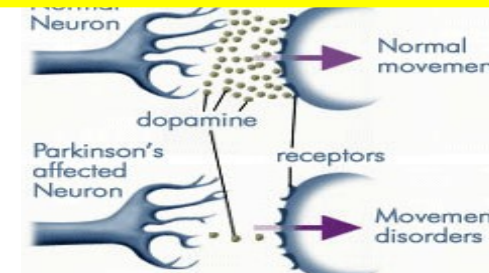
(A) Parkinson's disease



<https://www.slideshare.net/CsillaEgri/cerebellum-and-basal-ganglia>

Manifestations

- 1- Rigidity:
- 2- Bradykinesia / Akinesia:
- 3- Tremors:



<https://proteopedia.org/wiki/index.php/xylase>

Parkinson's disease = paralysis agitans



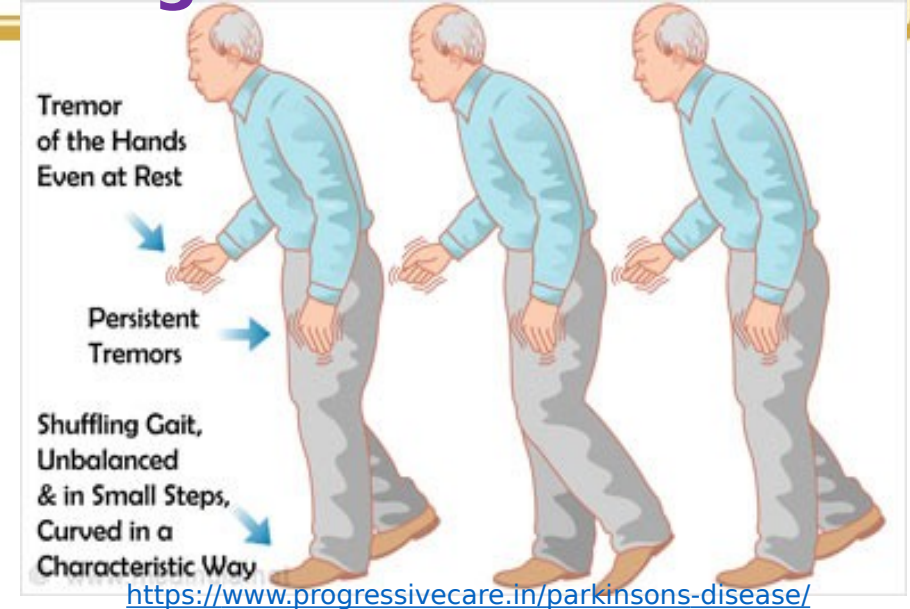
Manifestations

1- Bradykinesia / Akinesia:

Bradykinesia: movements take longer time

Akinesia: difficulty in initiating movement.

- ☐ Monotonous speech
- ☐ Mask face
- ☐ Gait: short steps + shuffling
loss of swinging arm movements



<https://www.youtube.com/watch?v=j86omOwx0Hk>

Parkinson's disease = paralysis agitans



Manifestation

S 2-

Rigidity:

- ❑ Increased impulses transmitted along the corticospinal tract to both α - and γ - motor neurons
- ❑ lead pipe rigidity or Cogwheel rigidity
- ❑ Flexors > extensors



<https://practicalneurology.com/patients-caregivers/movement-disorders>

Parkinson's disease = paralysis agitans



Rigidity **versus** spasticity

	Rigidity	Spasticity
1- Cause	Parkinsonism	UMNL
2-Mechanism:	Facilitation of both types of the AHCs; the alpha(α) and gamma(γ)	Facilitation of the gamma (γ) type only.
3-mainly affected muscles:	Flexors mainly	Antigravity muscles mainly.
4-Attitude:	Generalized flexion	Hyperextension of LL.
5-Reflexes:	Exaggerated.
6-Associated features:	Static tremors	clonus
7-Described as	Cog wheel/ lead pipe	clasp knife



Manifestation

3- Tremors:

- ☐ Involuntary rhythmic alternating contractions of antagonistic muscles
- ☐ Pill rolling at the hand or up & down movement of the mandible.
- ☐ Frequency of 4-6/sec.
- ☐ Present **at rest** - disappear during voluntary movements and sleep.

Parkinson's disease = paralysis agitans



Treatment

1- L-dopa Dopamine precursor, Can cross BBB

2- Anti-cholinergic drugs

3- Surgical treatment

Lesion in GPi

(**Pallidotomy**) or
subthalamic nucle

Implantation of
electrodes

4- Implantation of dopamine-secreting tissue

Diseases of the basal ganglia in human



	1- Chorea	2- Athetosis	3- Ballism	4- Parkinsonism
Lesion	Caudate & putamen	Globus pallidus	Subthalamus	Substantia nigra
Cause / mechanism	Hereditary) Huntington's chorea (Or rheumatic (Swdenham's chorea) Damage of neostriatum (GABA) of the indirect pathway → removal of inhibition of substantia nigra and globus pallidus → allows spontaneous outbursts of their activity → abnormal movements	Wilson's disease where ceruloplasmin is low, there is chronic copper intoxication → degeneration of lenticular nucleus	Vascular lesion	i- Cerebral atherosclerosis → loss of dopamine receptors. ii - Head trauma . lii- Phenothiazine drugs → block D2 dopamine receptors Degeneration of dopaminergic neurons in SNpc; particularly fibers to the putamen (imbalance between excitation & inhibition in BG)
Tone	--- (+ <u>pendular knee jerk</u>)	+++	---	+++ (rigidity)
Involuntary movements	Spontaneous, <u>rapid</u> , involuntary <u>dancing</u>	Continuous, <u>slow</u> <u>writhing</u> (<u>worm-like</u>) movements of the hands	<u>Rapid</u> , flailing, intense and violent	Static tremors



Parkinson's disease is caused by a lesion in:

a. Posteroventral nucleus of the thalamus.

b. Substantia nigra pars compacta

c. Substantia nigra pars reticulata.

d. Indirect circuit neurons of putamen.



Parkinson's disease is characterized by:

a. Involuntary dancing like movements.

b. Hypotonia

c. Static tremors.

d. Spastic gait.

e. Clasp knife spasticity

References



1. Guyton and Hall Textbook of Medical Physiology.

- <https://www.amazon.com/Guyton-Hall-Textbook-Medical-Physiology/dp/1455770051>

2. Ganong's Review of Medical Physiology, 25e.

-

<https://www.amazon.com/Ganongs-Review-Medical-Physiology-Twenty-Fifth/dp/007182510X>

-



*Thank
you*

